

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In rethe Application of:

LOUIS C. ARGENTA & MICHAEL J. MORYKWAS

Serial No.: 08/028,677

Filed: March 9, 1993

For: WOUND TREATMENT EMPLOYING REDUCED PRESSURE

Certificate of Mailing Under 37 CFR §1.8(a)

I hereby certify that this Correspondence is being β deposited on November 17, 1994 with the United States Postal Service as first-class mail in an envelope properly addressed to COMMISSIONER OF PATENTS AND TRADEMARKS, Washington, DC 20231.

November 17, 1994 Date of Certificate

DONALD R. PIPER, JR. Attorney for Applicant(s) PTO Reg. No. 29,337

Commissioner of Patents and Trademarks Washington, DC 20231

I am enclosing a supplemental Declaration in Support of Claim of Benefit of Prior U.S. Application for the aboveidentified patent application.

In the event that a fee is required and is not enclosed, the Commissioner is authorized to charge any underpayment or credit any overpayment to Deposit Account No. 04-1406 of the undersigned attorneys. A duplicate copy of this sheet is enclosed.

> DANN, DORFMAN, HERRELL AND SKILLMAN A Professional Corporation

Ву DONALD R. PIPER, DONALD R. PIPER, JR., ESQ. PTO Registration No. 29,337

DECLARATION IN SUPPORT OF CLAIM OF BENEFIT OF PRIOR U.S. APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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LOUIS C. ARGENTA & MICHAEL J. MORYKWAS	: :	
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Serial No. 08/028,677	; ;	
Filed: March 9, 1993	:	
For: WOUND TREATMENT EMPLOYING REDUCED PRESSURE	: : :	
As a below named inventor, I hereby declare:		
CLAIM UNDER 35 USC §120: I hereby claim the benefit un Prior U.S. Application(s) Application Serial Number(s) 07/792,001	der 35 USC §120 of the prior United Filing Date <u>Day-Mo-Year</u> 14-11-91	1 States application(s) listed below: <u>Status</u> <u>Pending-Patented-Abandoned</u> PENDING
Insofar as the subject matter of each of the claims of the presin the manner provided by the first paragraph of 35 USC §112 Rule 56(a)[37 CFR §1.56(a)] which occurred between the international filing date of this application.	2, I acknowledge the duty to disclose	material information as defined in
I hereby declare that all statements made herein of my own kn are believed to be true; and further that these statements were made are punishable by fine or imprisonment, or both, under false statements may jeopardize the validity of the application	e made with the knowledge that will Section 1001 of Title 18 of the Unite	ful false statements and the like so
SOLE OR FIRST JOINT INVENTOR	SECOND JOINT INVENTOR (if any)
Full Name Louis C. Argenta	Full Name Michael J. Morykw	as
	1 0 01	

Signature Signature Date_ Nov. Winston-Salem NC Residence_ **Pfafftown** NC Residence_ City State or Country City State or Country Citizenship United States of America Citizenship United States of America Post Office Address: Post Office Address: 6147 Spring Forest Drive 525 Knob View Drive 27040 NC 27104 **Pfafftown** Winston-Salem Zip Code Zip Code City State or Country City State or Country